



Texas Board of Nursing Offers a Webinar on:

Navigating Your Way to Medication Safety

The process of ordering, procuring, and administering medications impacts nurses and other healthcare professionals. Registered nurses have an important role in recognizing and preventing medication errors at various points in the process.

The purpose of this webinar is to identify the laws applicable to the medication process. The risks associated with the medication process and the application of evidence-based practices to promote patient safety will also be discussed.

OBJECTIVES

At the end of the Medication Safety webinar, participants will be able to:

1. Identify laws related to medication administration.
2. Discuss hazards of medication administration.
3. Apply evidence-based practices to medication administration.

Medication Safety

Wednesday January 9, 2013

(11:00 am to 12:00 pm CST)

Registration deadline is Friday January 4, 2013

(subject to change)

The cost to attend a webinar is \$25.00 for individuals
\$200.00 for groups up to 10 participants, and
\$25.00 for each additional participant

Once your registration form(s) are received in the Board's office, you will receive a confirmation e-mail and an invitation with instructions to participate in the webinar at the e-mail address provided no later than the Monday of the week of the webinar.

For more information, visit the Board's website at
www.bon.texas.gov/about/ce-offers.html#Webinar

A complete listing of webinar registration policies is at:
<http://www.bon.texas.gov/about/webinarRegistration.html>

If you have questions, please send an email to:
workshops@bon.texas.gov
Or phone: (512)305-6844

This continuing nursing education activity was approved by the Texas Nurses Association, accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

This program has been approved for 1.0 contact hour.

Registration Form

☐ Medication Safety – Wednesday, January 9, 2013

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LVN ☐ RN ☐ APRN ☐ Other _____
(please specify)

(Please Print Legibly)

*Last Name: _____

*First Name: _____

Home Address: _____

City: _____ State: _____

Zip Code: _____

Work Phone Number: () _____

Home Phone Number: () _____

*E-mail Address: _____

Check Number: _____

Amount enclosed: _____

If your employer is paying your fee, please list name of employer: _____

*** Required field**

Please mail payment and registration form(s) to:

Texas Board of Nursing
Attn: Workshops
333 Guadalupe, Ste. 3-460
Austin, TX 78701

Please note that payment and a completed registration form must be received in the Board's office by the registration deadline in order to receive the webinar invitation.